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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exar licer Brin- iden	e the name that is on government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your sting with the trustee.	Sheena First name L Middle name Kurz Last name and Suffix (Sr., Jr., II, III)	-	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.			
3.	you num Indi	y the last 4 digits of r Social Security beto or federal vidual Taxpayer ntification number	xxx-xx-7300		

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Case number (if known)

Debtor 1 Sheena L Kurz

About Debtor		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	910 Ainsley Drive West Chicago, IL 60185 Number, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code		
		DuPage County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known) Debtor 1 Sheena L Kurz

Par	t 2: Tell the Court About	Your E	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7						
	choosing to file under							
			hapter 11					
			hapter 12					
			hapter 13					
3.	How you will pay the fee	•	about how yo	u may pay. Tyր attorney is sub	pically, if you are paying the	check with the clerk's office in your loca fee yourself, you may pay with cash, cas r behalf, your attorney may pay with a cr	hier's check, or money	
					tallments. If you choose this ts (Official Form 103A).	s option, sign and attach the Application	for Individuals to Pay	
			I request that but is not requapplies to you	t my fee be wa uired to, waive ur family size ar	aived (You may request this your fee, and may do so only not you are unable to pay the	option only if you are filing for Chapter 7 y if your income is less than 150% of the fee in installments). If you choose this o (Official Form 103B) and file it with your	official poverty line that ption, you must fill out	
			ше пррисан		onaptor r ming r co marrou	(0.1.0.0.1.0.1.1.0.2.) a.i.a.i.a.i.a.i.a.i.a.i.a.i.a.i.a.i.a.i	poulis	
).	Have you filed for bankruptcy within the	■ N						
	last 8 years?	□ Ye						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ N	0					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if know	/n	
			Debtor	-		Relationship to you		
			District		When	Case number, if know	/n	
11.	Do you rent your residence?	■ N	o. Go to li	ne 12.				
	residence:	□ Ye	es. Has yo	ur landlord obta	ained an eviction judgment a	gainst you and do you want to stay in yo	ur residence?	
				No. Go to line	12.			
				Yes. Fill out Inbankruptcy pe		ction Judgment Against You (Form 101A) and file it with this	

Document Page 4 of 53 Case number (if known) Debtor 1 Sheena L Kurz Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs?

Debtor 1 Sheena L Kurz Document Page 5 of 53 Case number (if known)

Part 5:

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Sheena L Kurz Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do vou □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sheena L Kurz Signature of Debtor 2 Sheena L Kurz Signature of Debtor 1 Executed on Executed on July 28, 2016 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Sheena L Kurz Document Page 7 of 53 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James	Bernicky #	Date	July 28, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
James Be	rnicky #		
Printed name			
Bernicky I	₋aw Firm		
Firm name			
1001 E. Cł	nicago Ave		
Suite 121			
Naperville	, IL 60540		
Number, Street,	City, State & ZIP Code		
Contact phone	630-909-9902	Email address	info@BernickyLaw.com
6299091			
Bar number & S	tate		

Document Page 8 of 53 Fill in this information to identify your case: Sheena L Kurz Middle Name Last Name First Name First Name Middle Name Last Name

(Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number (if known)

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Debtor 1

Debtor 2

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	13,433.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	13,433.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	24,428.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	30,886.57
	Your total liabilities	\$	55,314.57
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,063.77
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,458.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Case number (if known) Debtor 1 Sheena L Kurz

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,113.98 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	10,148.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	10,148.00

Case 16-24280 Doc 1 Filed 07/28/16 Entered 07/28/16 15:02:56 Desc Main Page 10 of 53 Document Fill in this information to identify your case and this filing: Debtor 1 Sheena L Kurz Middle Name Last Name First Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Nissan Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: **Altima** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2014 Debtor 2 only Current value of the Current value of the 27000 Approximate mileage: entire property? Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$11,933.00 \$11,933.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for

Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$11,933.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Sheena L Kurz		Document	Case number (if known)
☐ Yes	Describe				
□ No				ment; computers, printers, scanners;	music collections; electronic devices
	Miscell	aneous use	d furniture and app	liances	\$500.00
Examp	ibles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; star	mp, coin, or baseball card collections;
Examp	musical instruments		ther hobby equipment; I	picycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
10. Firear Exam ■ No	Describe ms ples: Pistols, rifles, shotguns Describe	s, ammunition	, and related equipment		
□ No	es ples: Everyday clothes, furs Describe	, leather coats	s, designer wear, shoes,	accessories	
	Necess	ary used cl	othing		\$500.00
■ No		rume jewelry,	engagement rings, wedd	ding rings, heirloom jewelry, watches,	gems, gold, silver
	arm animals ples: Dogs, cats, birds, hors	es			
☐ Yes	Describe				
■ No	ther personal and househousehousehousehousehousehousehouse	-	ı did not already list, ir	ncluding any health aids you did no	ot list
	the dollar value of all of yo art 3. Write that number h			ny entries for pages you have attac	\$1,000.00
	escribe Your Financial Assets	witable intere		·	Comment value of the
Do you o	wn or have any legal or eq	uitable intere	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	ples: Money you have in you	-		osit box, and on hand when you file yo	our petition

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Case number (if known)

17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking account with Bank of America \$500.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you?

Current value of the

Debtor 1

Sheena L Kurz

page 3

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Case number (if known) Debtor 1 Sheena L Kurz portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$500.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Official Form 106A/B

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Debtor 1 Sheena L Kurz Case number (if known)

Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$11,933.00 57. Part 3: Total personal and household items, line 15 \$1,000.00 58. Part 4: Total financial assets, line 36 \$500.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$13,433.00 Copy personal property total \$13,433.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$13,433.00

Official Form 106A/B Schedule A/B: Property page 5

	Cas	Se 10-24280 DC	Document		Page 15 of 53	2.56 Desc Main
Fil	I in this inform	ation to identify your cas			auc 13 or 33	
De	ebtor 1	Sheena L Kurz				
D -	.htO	First Name	Middle Name	L	ast Name	
	ebtor 2 oouse if, filing)	First Name	Middle Name	L	ast Name	
Un	nited States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF I	LLIN	OIS	
Са	ase number					
(if k	known)					☐ Check if this is an amended filing
\bigcirc	fficial For	rm 106C				
			perty You Cla	im	as Exemnt	4/16
_	Cricadic	. c. 1110 1 10 ₁	ocity rod cia		d3 Exchipt	4,10
For speany fun exe	reach item of pecific dollar amy applicable stads—may be unemption to a pache applicable: It 1: Identify	own). property you claim as expount as exempt. Alterna atutory limit. Some exemplimited in dollar amount articular dollar amount astatutory amount. y the Property You Claim	empt, you must specify the tively, you may claim the fuptions—such as those for a However, if you claim and the value of the propert	e amo ull fai heal exen y is o	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu letermined to exceed that amoun	One way of doing so is to state a sing exempted up to the amount of benefits, and tax-exempt retirement up under a law that limits the t, your exemption would be limited
1.	Which set of	exemptions are you claii	ming? Check one only, ever	ı if yo	our spouse is filing with you.	
	You are cla	iming state and federal no	nbankruptcy exemptions. 1	1 U.S	S.C. § 522(b)(3)	
	☐ You are cla	iming federal exemptions.	11 U.S.C. § 522(b)(2)			
2.	For any prope	erty you list on Schedule	A/B that you claim as exe	mpt,	fill in the information below.	
		on of the property and line o hat lists this property	n Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		Altima 27000 miles	\$11,933.00	•	\$0.00	735 ILCS 5/12-1001(c)
	Line from Sch	edule A/B: 3. 1			100% of fair market value, up to any applicable statutory limit	
	Miscellaneo appliances	us used furniture and	\$500.00		\$0.00	735 ILCS 5/12-1001(b)
	Line from Sch	edule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
		used clothing edule A/B: 11.1	\$500.00		\$0.00	735 ILCS 5/12-1001(a)
	Line from Scri	eaule A/B. 11.1			100% of fair market value, up to	
					any applicable statutory limit	
	Checking: C Bank of Am	Checking account with erica	\$500.00		\$0.00	735 ILCS 5/12-1001(b)
	Line from Sch	edule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
3.			tion of more than \$160,375 very 3 years after that for ca		led on or after the date of adjustme	nt.)

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Official Form 106C

Yes Case 16-24280 Doc 1 Filed 07/28/16 Entered 07/28/16 15:02:56 Desc Main Page 16 of 53 Case number (if known) Document

Debtor 1 Sheena L Kurz

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Fill in this i	nformation to identify you	ur case:			
Debtor 1	Sheena L Kurz			\Box	
Dobtor 0	First Name	Middle Name Las	st Name		
Debtor 2 (Spouse if, filing	First Name	Middle Name Las	et Name		
United State	es Bankruptcy Court for the	NORTHERN DISTRICT OF ILLINO	IS	-	
Case number	er				
(if known)					if this is an ded filing
Official F	Form 106D				
		s Who Have Claims Se	cured by Propert	У	12/15
s needed, co number (if kn	py the Additional Page, fill it own).	If two married people are filing together, b out, number the entries, and attach it to th			
	ditors have claims secured b				
_		this form to the court with your other sch	edules. You have nothing else t	o report on this form.	
■ Yes.	Fill in all of the information	below.			
Part 1: L	ist All Secured Claims		Column A	Column B	Column C
for each claim	n. If more than one creditor has	more than one secured claim, list the creditor s a particular claim, list the other creditors in F ical order according to the creditor's name.	separately	Value of collateral that supports this claim	Unsecured portion
	vesters	Describe the property that secures the c	laim: \$24,428.00	\$11,933.00	\$12,495.00
Creditor'	's Name	2014 Nissan Altima 27000 miles			
380 II	H N Parkway				
Ste 3		As of the date you file, the claim is: Check apply.	call that		
Atlan	ta, GA 30339	Contingent			
Nimakan	Chant City Chata 9 7in Code	П.,			

2.1	1st Investers		Describe the property that secures the claim:	\$24,428.00	\$11,933.00	\$12,495.00
	Creditor's Name		2014 Nissan Altima 27000 miles			
	380 IH N Parkv Ste 300 Atlanta, GA 30	•	As of the date you file, the claim is: Check all that apply. Contingent			
	Number, Street, City, S	tate & Zip Code	☐ Unliquidated			
Who	owes the debt? C	heck one.	☐ Disputed Nature of lien. Check all that apply.			
_	ebtor 1 only ebtor 2 only		An agreement you made (such as mortgage or secured car loan)			
	ebtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)			
□ A ²	t least one of the deb	tors and another	☐ Judgment lien from a lawsuit			
	heck if this claim re community debt	lates to a	Other (including a right to offset)			
Date	debt was incurred	Opened 4/01/14 Last Active 7/29/15	Last 4 digits of account number 0001			

Add the dollar value of your entries in Column A on this page. Write that number here: \$24,428.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$24,428.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Page 18 of 53 Document Fill in this information to identify your case: Debtor 1 Sheena L Kurz Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 Advocate Good Samaritan Hospital Last 4 digits of account number 5728 \$8,122.43 Nonpriority Creditor's Name PO BOX 93548 When was the debt incurred? 12/26/12 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Medical

Document Page 19 of 53 Debtor 1 Sheena L Kurz Case number (if know) 4.2 **Arnold Scott Harris, PC** Last 4 digits of account number 4363 \$641.90 Nonpriority Creditor's Name 111 West Jackson Blvd When was the debt incurred? Suite 600 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Illinois State Toll Highway Authority ☐ Yes 4.3 Berlin-wheeler,inc-mo Last 4 digits of account number 0385 \$547.00 Nonpriority Creditor's Name 711 W Mccarty St When was the debt incurred? Opened 12/01/12 Jefferson City, MO 65101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney The Empire District Other. Specify ☐ Yes Electric 4.4 Dept Of Ed/navient Last 4 digits of account number 1123 \$3,654.00 Nonpriority Creditor's Name Opened 7/01/08 Last Active Po Box 9635 When was the debt incurred? 1/12/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim:

Official Form 106 E/F

debt

■ No ☐ Yes Student loans

☐ Other. Specify

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Educational

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Page 20 of 53 Document Debtor 1 Sheena L Kurz Case number (if know) 4.5 **Dept Of Ed/navient** Last 4 digits of account number 1123 \$4.927.00 Nonpriority Creditor's Name Opened 7/01/08 Last Active Po Box 9635 When was the debt incurred? 1/12/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Educational** 4.6 Dept Of Ed/navient Last 4 digits of account number 0708 \$1,500.00 Nonpriority Creditor's Name Opened 7/01/15 Last Active Po Box 9635 When was the debt incurred? 7/31/15 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.7 **Elmhurst memorial Healthcare** Last 4 digits of account number 3175 \$3.90 Nonpriority Creditor's Name 27535 Network Place When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Medical

☐ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Sheena L Kurz Case number (if know) 4.8 **Elmhurst Memorial Hospital-CS** Last 4 digits of account number 0353 \$197.70 Nonpriority Creditor's Name PO Box 4052 When was the debt incurred? 11/17/12 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Bills Other. Specify 4.9 **Elmhurst Memorial Hospital-CS** Last 4 digits of account number 9459 \$229.50 Nonpriority Creditor's Name PO Box 4052 When was the debt incurred? 10/11/12 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify 4.1 **Genesis Lending Servic** 3091 \$67.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 5/01/08 Last Active Po Box 4499 2/10/09 When was the debt incurred? Beaverton, OR 97076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

Educational

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Debtor 1 Sheena L Kurz Case number (if know) 4.1 IC System 3001 \$437.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/01/14 When was the debt incurred? Po Box 64378 St. Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Comed ☐ Yes 4.1 **IC System** 4001 \$1,898.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 3/01/11 444 Highway 96 East; Po Box 64378 St. Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Kindercare Learning** ☐ Yes Other. Specify Centers **Illinois Collection Service** Last 4 digits of account number 9738 \$536.00 Nonpriority Creditor's Name When was the debt incurred? Opened 6/01/13 Po Box 1010 Tinley Park, IL 60477 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify

Document Page 23 of 53 Debtor 1 Sheena L Kurz Case number (if know) 4.1 Mage & Price 3001 \$413.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 707 Lake Cook Road When was the debt incurred? Deerfield, IL 60015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.1 7266 Med Business Bureau \$745.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1219 When was the debt incurred? Opened 11/01/09 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Medical ☐ Yes 4.1 Med Business Bureau 5749 \$745.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Po Box 1219 When was the debt incurred? Opened 7/01/10 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection Attorney Medical

Document Page 24 of 53 Debtor 1 Sheena L Kurz Case number (if know) 4.1 Med Business Bureau 1441 \$462.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1219 When was the debt incurred? Opened 7/01/10 Park Ridge, IL 60068 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Medical ☐ Yes 4.1 Med Business Bureau 1442 \$50.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Po Box 1219 When was the debt incurred? Opened 7/01/10 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Medical ☐ Yes 4.1 Med Business Bureau 7186 \$745.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Po Box 1219 Opened 4/01/10 When was the debt incurred? Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection Attorney Medical

Document Page 25 of 53 Debtor 1 Sheena L Kurz Case number (if know) 4.2 Medical Business Bureau 0830 \$776.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? ATTN: Bankruptcy PO Box 1219 Park Ridge, IL 60068-7219 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical - DuPage Emergency PHYS ☐ Yes 4.2 Midwest Diagnostric Pathology \$137.00 9852 Last 4 digits of account number Nonpriority Creditor's Name 75 Remittance Dr When was the debt incurred? 12/26/12 Ste 3070 Chicago, IL 60675-3070 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.2 **Northwest Collectors** 3960 \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 3601 Algonquin Rd Ste 23 When was the debt incurred? Opened 4/01/14 Rolling Meadows, IL 60008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify Enforcement

Collection Attorney Villa Park Photo

Document Page 26 of 53 Debtor 1 Sheena L Kurz Case number (if know) 4.2 Tiwn Oaks Recover, LLC 8288 \$3,637.64 Last 4 digits of account number 3 Nonpriority Creditor's Name 1925 E Bennett When was the debt incurred? Suite I Springfield, MO 65804 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community deht ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CLIENT Bee Creek Apt #24024 ☐ Yes 4.2 Transworld Systems, INC 2740 \$214.50 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 17213 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Illinois State Toll HWY Authority ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Computer Credit, Inc** Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **PO BOX 5238** Part 2: Creditors with Nonpriority Unsecured Claims Winston Salem, NC 27113 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Computer Credit, Inc. Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **PO BOX 5238** ■ Part 2: Creditors with Nonpriority Unsecured Claims Winston Salem, NC 27113 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Computer Credit, Inc. Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 640 West 4th St. ■ Part 2: Creditors with Nonpriority Unsecured Claims

Computer Credit, Inc. 640 West 4th St.

Name and Address

Official Form 106 E/F

Winston Salem, NC 27113

On which entry in Part 1 or Part 2 did you list the original creditor?

0353

☐ Part 1: Creditors with Priority Unsecured Claims

Last 4 digits of account number

Line 4.9 of (Check one):

Debtor 1 Sheena L Kurz	Document Pag	e 27 of 53 Case number (if know)
Winston Salem, NC 27113	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims 9459
Name and Address	On which entry in Part 1 or Part 2 di	·
Douglas A. Carter	Line 4.23 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
2847 S. Ingram Mill Rd. Suite A-100		■ Part 2: Creditors with Nonpriority Unsecured Claims
Springfield, MO 65804		
	Last 4 digits of account number	Bee Creek Apt
Name and Address	On which entry in Part 1 or Part 2 di	
I.C. Systems	Line 4.11 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy 444 Highway 96 East Saint Paul, MN 55164		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	3039
Name and Address	On which entry in Part 1 or Part 2 di	
Medical Business Bureau, LLC	Line 4.20 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims
1175 Devin Dr. STE 173		Part 2: Creditors with Nonpriority Unsecured Claims
Muskegon, MI 49441		
	Last 4 digits of account number	0830
Name and Address	On which entry in Part 1 or Part 2 di	·
Medical Recovery Specialists 2250 E Devon Ave.	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Ste 352		Part 2: Creditors with Nonpriority Unsecured Claims
Des Plaines, IL 60018		
	Last 4 digits of account number	5728
Name and Address	On which entry in Part 1 or Part 2 di	
MiraMed Revenue Group	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Dept. 77304 PO Box 77000 Detroit, MI 48277		Part 2: Creditors with Nonpriority Unsecured Claims
Detroit, wii 40277	Last 4 digits of account number	7925
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?
Radiologists of DuPage, S.C.	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
520 E 22ND ST Lombard, IL 60148		■ Part 2: Creditors with Nonpriority Unsecured Claims
Lombard, IL 00170	Last 4 digits of account number	9852
Part 4: Add the Amounts for Each Typ	e of Unsecured Claim	

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	Ct.	Total Claim
Total	ОІ.	Student loans	6f.	\$ 10,148.00
claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that		
Holli Part 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 20,738.57

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Total Nonpriority. Add lines 6f through 6i.

6j. 30,886.57 Case 16-24280 Doc 1 Filed 07/28/16 Entered 07/28/16 15:02:56 Desc Main

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Fill in this information to identify your case: Debtor 1 Sheena L Kurz Middle Name First Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

		Docume	ent Page 30 d	of 53	
Fill in this	information to identify your	case:			
Debtor 1	Sheena L Kurz				
20010	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ner				
(if known)				☐ Check if this is	an
				amended filing	J
Sched Codebtors		re also liable for any deb		s complete and accurate as possible. If two ma ion. If more space is needed, copy the Additior	
ill it out, ar		boxes on the left. Attach	the Additional Page t	o this page. On the top of any Additional Pages	
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
Arizona No.	Go to line 3. Did your spouse, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Wash	y? (Community property states and territories incluington, and Wisconsin.)	ade
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the perso sure you have listed the creditor on Schedule I 16G). Use Schedule D, Schedule E/F, or Schedu	D (Official ıle G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe to Check all schedules that apply:	the debt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_	N 1				
	Number Street City	State	ZIP Code		
3.2				Schedule D, line	
ı	Name			Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
	City	State	ZIP Code		

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	in this information to ide btor 1 Sh	entify your ca neena L Ku									
	btor 2					_					
	-	Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS							
	se number nown)								ed filing ent showin	g postpetition ollowing date:	
0	fficial Form 10	<u> </u>					1	MM / DD/ Y	YYYY		
S	chedule I: Yo	our Inco	ome								12/1
spo atta Pa	use. If you are separate ch a separate sheet to the separate sheet	ted and your this form. (are married and not filii spouse is not filing wi On the top of any additi	th you, do not inclu	de infor	mati	on abou	t your spo	ouse. If mo	ore space is	needed,
1.	Fill in your employm information.	ent		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more than attach a separate pag		Employment status	■ Employed	_			☐ Employed			
	information about add employers.			☐ Not employed				☐ Not e	mployed		
	Include part-time, sea	sonal or	Occupation	Patient Care Te	chnolo	gist					
	self-employed work.	isoriai, oi	Employer's name	Advocate Healt	h Care			-			
	Occupation may inclu or homemaker, if it ap		Employer's address	100 Spalding Do							
			How long employed the	here? <u>5 mont</u>	hs			_			
Pa	rt 2: Give Details	About Mon	thly Income								
	imate monthly income use unless you are sepa		te you file this form. If	you have nothing to r	eport for	any	line, writ	e \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spore space, attach a separe		re than one employer, co his form.	ombine the informatio	n for all	empl	oyers for	that perso	on on the li	nes below. If	you need
							For De	btor 1		btor 2 or ng spouse	
2.			y, and commissions (be alculate what the monthle		2.	\$	2	2,290.15	\$	N/A	-
3.	Estimate and list mo	onthly overti	me pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Inco	me. Add lin	e 2 + line 3.		4.	\$	2,2	90.15	\$	N/A	

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Deb	otor 1	Sheena L Kurz	-		Case	e number (<i>if know</i>	vn)				
					Fo	r Debtor 1			Debtor : filing s		
	Cop	y line 4 here	4.		\$_	2,290.1	5	\$	illing 5	N/A	<u> </u>
5.	List	all payroll deductions:									
٠.	5a.	Tax, Medicare, and Social Security deductions	5	a	\$	1,153.4	۱7	\$		N/A	
	5b.	Mandatory contributions for retirement plans		o.	\$-	0.0		\$		N/A	_
	5c.	Voluntary contributions for retirement plans		c.	\$-	72.9		\$		N/A	_
	5d.	Required repayments of retirement fund loans		d.	\$	0.0	_	\$		N/A	_
	5e.	Insurance	56	Э.	\$	0.0	_	\$		N/A	_
	5f.	Domestic support obligations	5f	f.	\$	0.0	00	\$		N/A	<u> </u>
	5g.	Union dues	5	g.	\$	0.0	00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5l	h.+	\$_	0.0	00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,226.3	88	\$		N/A	<u>.</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,063.7	7	\$		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•			Φ.			
	8b.	monthly net income. Interest and dividends		a. o.	\$ \$	0.0		\$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_ \$	0.0		\$ \$		N/A	_
	8d.	Unemployment compensation		d.	\$	0.0		\$		N/A	_
	8e.	Social Security	86	е.	\$	0.0		\$		N/A	_ \
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f _ 8(\$_ \$_	0.0 0.0		\$ 		N/A N/A	_
	8h.	Other monthly income. Specify:	_ 81	h.+	\$	0.0	00	+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$_	0.0	00	\$		N/	A
10	Cale	culate monthly income. Add line 7 + line 9.	10.	Φ		1,063.77 +	\$		N/A	= \$	1,063.77
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		1,003.77	Ψ.		IN/A	- Ψ -	1,003.77
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep						chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	1,063.77
13.	Do	you expect an increase or decrease within the year after you file this form?	?						L	Combi month	ned ly income
	_	No. Yes Explain:									

Official Form 106I Schedule I: Your Income page 2

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Fill in	this informa	ation to identify yo	ur case:					
Debtor		Sheena L Ku					k if this is: An amended filing	
Debtor							A supplement shov	ving postpetition chapter the following date:
``	se, if filing)		NOTE	IEDN BIOTRICT CE	1010	_	·	
United	States Bank	ruptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	IOIS	, I	MM / DD / YYYY	
Case n (If know	number wn)							
		orm 106J						
		J: Your I			f:::	-th	II	12/1
inforn	mation. If m		eded, atta	. If two married people a ich another sheet to this n.				
Part 1		ribe Your House	hold					
_	s this a joil No. Go to							
		es Debtor 2 live i	n a separ	ate household?				
		-						
	ΠY	es. Debtor 2 mus	t file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of Debto	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state				Danaktan		•	□ No
a	dependents	names.			Daughter		8	■ Yes □ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3. C	Do your exp	oenses include		No				⊔ Yes
		f people other ti d your depende	nan _—	Yes				
Part 2		ate Your Ongoi						
expen				uptcy filing date unless y y is filed. If this is a sup				
	•	•		government assistance	•			
	ial Form 10		a nave me	naded it on ochedule i.	rour moome	-	Your expe	enses
		or home owners		ses for your residence.	Include first mortgag	e 4. \$		500.00
H	f not includ	ded in line 4:						
4	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
				upkeep expenses		4c. \$		0.00
		owner's associat			ma aquitu lasas	4d. \$	-	0.00
5. A	4dditional i	ποrtgage payme	ents for yo	our residence, such as ho	rne equity loans	5. \$		0.00

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Debtor	r 1 Sheen	a L Kurz	Case num	ber (if known)	
S. U	Itilities:				
_		ity, heat, natural gas	6a.	\$	0.00
6		sewer, garbage collection	6b.		0.00
	,	one, cell phone, Internet, satellite, and cable services	6c.		200.00
	d. Other. S		6d.	·	0.00
		usekeeping supplies		\$	300.00
		d children's education costs	8.	\$	187.00
		ndry, and dry cleaning	9.	·	
		· · · · · · · · · · · · · · · · · · ·		·	20.00
		e products and services	10.	·	0.00
		dental expenses	11.	\$	0.00
	•	on. Include gas, maintenance, bus or train fare.	12.	Φ	240.00
		e car payments.		·	
		nt, clubs, recreation, newspapers, magazines, and books	13.		80.00
		ontributions and religious donations	14.	\$	80.00
	nsurance.				
		e insurance deducted from your pay or included in lines 4 or 20.	45-	Φ.	2.22
	5a. Life ins		15a.	·	0.00
	5b. Health i		15b.		0.00
	5c. Vehicle		15c.	· -	100.00
15	5d. Other ir	nsurance. Specify:	15d.	\$	0.00
Ta	axes. Do no	t include taxes deducted from your pay or included in lines 4 or 20.			
S	specify:		16.	\$	0.00
. In	nstallment o	r lease payments:			
17	7a. Car pay	ments for Vehicle 1	17a.	\$	561.00
17	7b. Car pay	ments for Vehicle 2	17b.	\$	0.00
17	7c. Other. S	Specify:	17c.	\$	0.00
	7d. Other. S		17d.	\$	0.00
		nts of alimony, maintenance, and support that you did not report as		· —	
		m your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
		nts you make to support others who do not live with you.		\$	0.00
S	specify:		19.		
	· · · —	operty expenses not included in lines 4 or 5 of this form or on Scho		our Income.	
		ges on other property	20a.		0.00
	0b. Real es		20b.		0.00
		y, homeowner's, or renter's insurance	20c.	·	0.00
	•	nance, repair, and upkeep expenses	20d.		0.00
		wner's association or condominium dues	20e.	·	0.00
	Other: Specif	·	21.	+\$	40.00
D	Daughters I	ce Skating every 6 weeks		_+\$	150.00
C	alculate voi	ur monthly expenses			
	•	s 4 through 21.		\$	2,458.00
		e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,430.00
22	2c. Add line	22a and 22b. The result is your monthly expenses.		\$	2,458.00
C	alculate voi	ur monthly net income.			
		ne 12 (your combined monthly income) from Schedule I.	23a.	\$	1,063.77
		our monthly expenses from line 22c above.	23b.		2.458.00
۷.	оо. Оору ус	out monthly expenses from the 226 above.	200.		2,450.00
2	3c Subtrac	ct your monthly expenses from your monthly income.			
۷.		sult is your <i>monthly net income</i> .	23c.	\$	-1,394.23
	1116 163	ancio your monthly not income.		L	·
. D	o you expe	ct an increase or decrease in your expenses within the year after yo	ou file this	s form?	
		you expect to finish paying for your car loan within the year or do you expect you			ease or decrease because of a
m	nodification to t	he terms of your mortgage?			
	No.				
	☐ Yes.	Explain here:			
_	- 103.	=-4			

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							•	
Fill in t	his informa	ation to identify your	case:					
Debtor	1	Sheena L Kurz						
		First Name	Middle Name	La	st Name			
Debtor 2 (Spouse if	_	First Name	Middle Name	l o	st Name			
(Spouse II	i, illirig)	First Name	wildule Name	La	st Name			
United 9	States Bank	cruptcy Court for the:	NORTHERN DISTRI	CT OF ILLING	OIS			
Case nu	umber							
(if known)							☐ Check if this is an	
							amended filing	
o		1000						
		<u>106Dec</u>			_			
Dec	larati	on About a	ın Individua	al Debt	or's Sch	edules	12/	15
If two m	arried peo	ple are filing together	, both are equally res	ponsible for	supplying correct	information.		
You mus	st file this f	form whenever you fi	le bankruptcy schedu	les or amend	ed schedules. Ma	aking a false sta	tement, concealing property, or	
				ankruptcy cas	se can result in fir	nes up to \$250,0	000, or imprisonment for up to 20)
years, o	or both. 18	U.S.C. §§ 152, 1341, 1	519, and 3571.					
	Sign I	Below						
Die	d you pay	or agree to pay some	one who is NOT an at	torney to help	you fill out bank	cruptcy forms?		
	No							
	Yes. Na	me of person				Attach Bai	nkruptcy Petition Preparer's Notice) ,
_	•	•				Declaratio	n, and Signature (Official Form 11	9)
Und	der penalty	of perjury, I declare	that I have read the su	ımmary and	schedules filed w	ith this declarat	ion and	
		rue and correct.		•				
Y	/s/ Sheer	na I Kurz		х				
^	Sheena			^	Signature of Deb	otor 2		
		of Debtor 1			3			
	5				5.			
	Date Ju	lly 28, 2016			Date			

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Fill in this	s information to identify you	r case:			
Debtor 1	Sheena L Kurz				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ahor				
(if known)					Check if this is an
					amended filing
O((; - ; -	I = 407				
	Il Form 107	Affaira far Indivi	duala Filipa fan I	Danley untare	
	nent of Financial				4/16
				e equally responsible for sup ny additional pages, write yo	
number (if	known). Answer every que	stion.	·		
Part 1:	Give Details About Your Ma	arital Status and Where You	u Lived Before		
1. What	is your current marital statu	is?			
	Married				
= "	Not married				
2. Durin	g the last 3 years, have you	lived anywhere other than	where you live now?		
_		,			
_	No Yes. List all of the places you I	ived in the last 3 years. Do n	ot include where you live no	w	
	. ,	·	,		Detec Dahten 2
Debt	or 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	aaress:	Dates Debtor 2 lived there
	Bumblebee Street, Unit 2 nson, MO 65616-6711	24 From-To: 2011 - early 2	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
ыа	15011, INO 03010-0711	Zorr carry Z	010		110111-10.
states and		lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto f	nity property state or territor Rico, Texas, Washington and V	
Part 2	Explain the Sources of You	r Income			
Fill in	ou have any income from en the total amount of income yo are filing a joint case and you	u received from all jobs and	all businesses, including par		ndar years?
	No				
_	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	uary 1 of current year until you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,845.55	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

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					Dalitan 4			Dalitano		
					Debtor 1			Debtor 2		
					Sources of income Check all that apply.		s income e deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December :	31, 2015)	■ Wages, commissions, bonuses, tips		\$15,033.00	☐ Wages, com bonuses, tips	missions,	
					☐ Operating a business			☐ Operating a	business	
			dar year bei December		■ Wages, commissions, bonuses, tips		\$35,502.00	☐ Wages, com bonuses, tips	missions,	
					☐ Operating a business			☐ Operating a	business	
20	13: T	ax Ret	urn		☐ Wages, commissions, bonuses, tips		\$43,614.00	☐ Wages, com bonuses, tips	missions,	
					☐ Operating a business			☐ Operating a	business	
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child supplied and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits winnings. If you are filing a joint case and you have income that you received together, list it only once under D. List each source and the gross income from each source separately. Do not include income that you listed in li No Yes. Fill in the details.				alimony; child supp cted from lawsuits; only once under De	royalties; ar ebtor 1.					
					Debtor 1 Sources of income Describe below.	each	s income from source e deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	art 3:	List	Certain Pa	yments You	Made Before You Filed for I		,			
6.	Are		Debtor 1's Neither De	or Debtor 2'ebtor 1 nor Dorimarily for a 90 days befo	s debts primarily consumer ebtor 2 has primarily consu personal, family, or househol re you filed for bankruptcy, di	r debts? umer deb ld purpos	ots. Consumer debase." y any creditor a tota	al of \$6,425* or mo	re?	
paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. A not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.							•			
	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?									
			■ No.	Go to line 7						
			☐ Yes	include pay	ach creditor to whom you pai ments for domestic support of this bankruptcy case.					
	Cre	editor'	s Name and	l Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for

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Case number (if known) Debtor 1 Sheena L Kurz

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No						
	☐ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos No		ments or transfer a	any property on a	ccount of a d	ebt that benefited an	
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name	
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures					
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title					t or custody	
	Case number						
10.	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garnis	hed, attached	d, seized, or levied? Value of the property	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any a	amounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount	
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess			efit of creditors, a	
Par	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person	?	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value	
	Person to Whom You Gave the Gift and Address:						

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Debt	tor 1	Sheena L Kurz	[Document	Page 39 of 53 Case numb	Der (if known)		
	= 1	 Vithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity No Yes. Fill in the details for each gift or contribution. 						
	Gifts more Char	s or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod	total	Describe what y	ou contributed	Dates you contributed	Value	
Part	6:	List Certain Losses						
		in 1 year before you filed for bankru mbling?	iptcy or	since you filed fo	r bankruptcy, did you lose a	nything because of thef	t, fire, other disaster	
	_	No Yes. Fill in the details.						
		cribe the property you lost and the loss occurred	Include	the amount that in	coverage for the loss surance has paid. List pendin 3 of Schedule A/B: Property.	Date of your loss	Value of property loss	
Part	7:	List Certain Payments or Transfer	s					
!	Pers Addi Ema Pers Beri 100′ Sui	ulted about seeking bankruptcy or de any attorneys, bankruptcy petition plans. No Yes. Fill in the details. Son Who Was Paid ress ill or website address on Who Made the Payment, if Not Vanicky Law Firm 1 E. Chicago Ave ite 121 perville, IL 60540	preparers	s, or credit counsel		Date payment or transfer was made 2015	Amount of payment \$1,532.00	
-	Acc	ess Counseling		\$24 for couns	eling courses	2013	\$24.00	
	prom Do no	in 1 year before you filed for bankruised to help you deal with your creot include any payment or transfer that No Yes. Fill in the details.	ditors or	to make paymer		ay or transfer any prope	rty to anyone who	
	Pers Addi	son Who Was Paid ress		Description and transferred	l value of any property	Date payment or transfer was made	Amount of payment	
t I i	trans Includ	in 2 years before you filed for banking ferred in the ordinary course of you do both outright transfers and transfer de gifts and transfers that you have all No	u r busin e s made a	ess or financial as as security (such as	ffairs? s the granting of a security into			

☐ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

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Debtor 1 Sheena L Kurz

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)								
	■ No □ Yes. Fill in the details.								
	Name of trust Description and value of the property transferred								
Par	rt 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Storag	e Units	made				
20.	Within 1 year before you filed for bankruptc	y, were any financial ac	counts or instrumer	nts held in your name, or for y	our benefit, closed,				
	sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc			eposit; shares in banks, cred	it unions, brokerage				
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account o instrument	r Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any sa	fe deposit box or other depos	sitory for securities,				
	No								
	Yes. Fill in the details. Name of Financial Institution	Who else had acc	ease to it?	cribe the contents	Do you still				
	Address (Number, Street, City, State and ZIP Code)	Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?				
22.	Have you stored property in a storage unit of	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		cribe the contents	Do you still have it?				
Pai	rt 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	No								
	☐ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		cribe the property	Value				
Pai	rt 10: Give Details About Environmental Info	ormation							
For	the purpose of Part 10, the following definition	ons apply:							
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	ne air, land, soil, surfac	e water, groundwate						

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Case number (if known) Document

Debtor 1 Sheena L Kurz

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of a	ny release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it zIP Code)							
26.	Have you been a party in any judicial or admi	inistrative proceeding under any en	vironr	mental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
Par	11: Give Details About Your Business or C	connections to Any Business						
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have a	any of	the following connections to any	business?			
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity	y, eith	er full-time or part-time				
	☐ A member of a limited liability compa	ny (LLC) or limited liability partners	hip (L	LLP)				
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting	or equity securities of a corporation	n					
	■ No. None of the above applies. Go to Pa	art 12.						
	Yes. Check all that apply above and fill i	n the details below for each busines	ss.					
	Business Name Address	Describe the nature of the business	3	Employer Identification number Do not include Social Security n	umber er ITIN			
		Name of accountant or bookkeeper	me of accountant or bookkeeper		idilibei oi iiin.			
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No							
	Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)							

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are true with a l	e and correct. I understand that ma	t of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers king a false statement, concealing property, or obtaining money or property by fraud in connection up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Sh	eena L Kurz	
	na L Kurz ure of Debtor 1	Signature of Debtor 2
Date	July 28, 2016	Date
Did you ■ No	ı attach additional pages to <i>Your</i> S	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☐ Yes		
Did yoι ■ No	ı pay or agree to pay someone who	o is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	mation to identify your	case:				
Debtor 1	Sheena L Kurz					
	First Name	Middle Name	Las	st Name		
Debtor 2	E: AN					
(Spouse if, filing)	First Name	Middle Name	Las	st Name		
United States Ba	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINO	IS		
Case number						
(if known)						☐ Check if this is an
						amended filing
Official Fo	rm 108					
		n for Indiv	iduale Fi	ling Under Char	nter 7	12/15
Otatemer	it or intentio	ii ioi iiiaiv	iduais i i	ing onder ona	Jici 1	12/13
If you are an indi	vidual filing under cha	pter 7. vou must fill	out this form if:			
	e claims secured by yo	-				
_	ed personal property a		ot expired.			
You must file this	s form with the court we ever is earlier, unless th	ithin 30 days after	you file your ban	kruptcy petition or by the dat You must also send copies to		
If two married pe	eople are filing togethe	r in a joint case, bo	th are equally res	sponsible for supplying corre	ct informat	ion. Both debtors must
sign an	d date the form.					
	and accurate as possib our name and case nur		needed, attach	a separate sheet to this form.	On the top	of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims				
List I.	our orcanors who hav	c occurca olamis				
1. For any credite information be	-	art 1 of Schedule D	: Creditors Who	Have Claims Secured by Prop	perty (Offici	al Form 106D), fill in the
	editor and the property t	hat is collateral	What do you in secures a deb	ntend to do with the property t?		Did you claim the property as exempt on Schedule C?
Creditor's 1	st Investers		☐ Surrender th	ne property.	[□ No
name:				property and redeem it.		
Description of	2014 Nissan Altim	a 27000 miles	•	roperty and enter into a	ı	Yes
property	2011111000117111111	a 27 000 mmoo		on Agreement. roperty and [explain]:		
securing debt:			□ Retail the p	Toperty and [explain].		
	our Unexpired Persona		in Cabadula C. F	Superitoria Contrasta and Ilina		(Official Form 4000) fill
in the informatio	n below. Do not list rea	il estate leases. Un	expired leases a	executory Contracts and Unex re leases that are still in effec not assume it. 11 U.S.C. § 365	t; the lease	
Describe your u	nexpired personal pro	norty leases			Will +	ne lease be assumed?
Describe your u	mexpired personal pro	perty leases			vviii ti	ie iease de assumeu:
Lessor's name:					□ No	
Description of lea Property:	ased					
i Toperty.					☐ Ye	es
Lessor's name:					□ No	1
Description of lea	ased				_ 140	•
Property:					☐ Ye	es
Lessor's name:					□ No)

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor 1 Sheena L Kurz	Case number (if known)
Description of leased	
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intenti property that is subject to an unexpired lease.	on about any property of my estate that secures a debt and any personal
X /s/ Sheena L Kurz	x
Sheena L Kurz Signature of Debtor 1	Signature of Debtor 2
Date July 28, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-24280 Doc 1 Filed 07/28/16 Entered 07/28/16 15:02:56 Desc Main Document Page 49 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	e Sheena L Kurz			Case No.		
			Debtor(s)	Chapter	7	
	DISCLOSU	RE OF COMPENSA	TION OF ATTO	RNEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) compensation paid to me within be rendered on behalf of the debt	one year before the filing of t	he petition in bankruptcy	, or agreed to be paid	to me, for services i	
	For legal services, I have a	greed to accept		\$	1,232.00	
	Prior to the filing of this sta	ntement I have received		\$	1,232.00	
					0.00	
2.	The source of the compensation	paid to me was:				
	■ Debtor □ Othe	er (specify):				
3.	The source of compensation to l	pe paid to me is:				
	■ Debtor □ Oth	er (specify):				
4.	■ I have not agreed to share the	ne above-disclosed compensat	ion with any other person	unless they are mem	bers and associates	of my law firm.
	☐ I have agreed to share the all copy of the agreement, toge	pove-disclosed compensation ther with a list of the names of				law firm. A
5.	In return for the above-disclose	d fee, I have agreed to render	legal service for all aspec	ts of the bankruptcy of	ase, including:	
	reaffirmation agree		e to market value; ex s needed; preparation	emption planning;	preparation and ons pursuant to	filing of 11 USC
6.	By agreement with the debtor(s)	, the above-disclosed fee does he debtors in any dischar	s not include the followin		es, relief from sta	y actions or
		CE	ERTIFICATION			
	I certify that the foregoing is a cbankruptcy proceeding.	omplete statement of any agree	eement or arrangement fo	r payment to me for r	epresentation of the	debtor(s) in
١.	July 28, 2016		/s/ James Bernic	kv #		
_	Date		James Bernicky	# 6299091		
			Signature of Attorn Bernicky Law Fi			
			1001 E. Chicago			
			Suite 121	- 40		
			Naperville, IL 609 630-909-9902 Fa			
			info@BernickyL			
			Name of law firm			

United States Bankruptcy Court Northern District of Illinois

In re	Sheena L Kurz		Case No.	
		Debtor(s)	Chapter	7
	VERIFICATION OF CREDITOR MATRIX			
		Number of Creditors: 26		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	ors is true and	correct to the best of my
Date:	July 28, 2016	/s/ Sheena L Kurz Sheena L Kurz Signature of Debtor		

1st Investers 380 IH N Parkway Ste 300 Atlanta, GA 30339

Advocate Good Samaritan Hospital PO BOX 93548 Chicago, IL 60673

Arnold Scott Harris, PC 111 West Jackson Blvd Suite 600 Chicago, IL 60604

Berlin-wheeler, inc-mo 711 W Mccarty St Jefferson City, MO 65101

Computer Credit, Inc PO BOX 5238 Winston Salem, NC 27113

Computer Credit, Inc. 640 West 4th St. Winston Salem, NC 27113

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

Douglas A. Carter 2847 S. Ingram Mill Rd. Suite A-100 Springfield, MO 65804

Elmhurst memorial Healthcare 27535 Network Place Chicago, IL 60673

Elmhurst Memorial Hospital-CS PO Box 4052 Carol Stream, IL 60197 Genesis Lending Servic Po Box 4499 Beaverton, OR 97076

I.C. Systems
Attn: Bankruptcy
444 Highway 96 East
Saint Paul, MN 55164

IC System
Attn: Bankruptcy
Po Box 64378
St. Paul, MN 55164

IC System
Attn: Bankruptcy
444 Highway 96 East; Po Box 64378
St. Paul, MN 55164

Illinois Collection Service Po Box 1010 Tinley Park, IL 60477

Mage & Price 707 Lake Cook Road Deerfield, IL 60015

Med Business Bureau Po Box 1219 Park Ridge, IL 60068

Medical Business Bureau ATTN: Bankruptcy PO Box 1219 Park Ridge, IL 60068-7219

Medical Business Bureau, LLC 1175 Devin Dr. STE 173 Muskegon, MI 49441

Medical Recovery Specialists 2250 E Devon Ave. Ste 352 Des Plaines, IL 60018 Midwest Diagnostric Pathology 75 Remittance Dr Ste 3070 Chicago, IL 60675-3070

MiraMed Revenue Group Dept. 77304 PO Box 77000 Detroit, MI 48277

Northwest Collectors 3601 Algonquin Rd Ste 23 Rolling Meadows, IL 60008

Radiologists of DuPage, S.C. 520 E 22ND ST Lombard, IL 60148

Tiwn Oaks Recover, LLC 1925 E Bennett Suite I Springfield, MO 65804

Transworld Systems, INC PO BOX 17213 Wilmington, DE 19850